

MARYLAND AFFORDABLE HOUSING TRUST

Application for Funding
7800 Harkins Road, Room 366
Lanham, Maryland 20706

MAHT ID NO. _____

Fortieth Funding Round – Fall 2016

Application Due on **August 31, 2016** in Triplicate (no binders)

**PLEASE REVIEW ALL PROGRAM GUIDELINES FOUND ON THE TRUST'S
WEB SITE BEFORE SUBMITTING APPLICATION.**
(INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED,
APPLICATION MUST BE SIGNED)

1. Applicant Identification – for capital projects, entity owning the property must be an applicant

TYPE: ☐ Non-profit ☐ Public Housing Authority ☐ Limited partnership
☐ For-profit ☐ Local government ☐ Limited Liability Corporation
☐ Other (specify): _____

Applicant: _____

Address: _____

City: _____ State _____ Zip: _____

Phone: () _____ Fax: () _____

Email: _____

Executive Director: _____

Federal I.D. or Social Security Number: _____

Contact Person for Award Notification: _____

I, the _____ (title) of the organization, am authorized to sign for the
applicant and certify that the information contained in this application is correct and accurate.

Signature _____ Date _____

2. Funding Request

MAHT amount requested: (a)\$ _____ Total project cost (b)\$ _____
(NOT TO EXCEED \$75,000)

TENURE TYPE	ACTIVITY TYPE	
<input type="checkbox"/> Rental	Capital (CHOOSE BELOW) <input type="checkbox"/> New Construction <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Preservation <input type="checkbox"/> Acquisition	Non-capital (MUST BE RELATED TO SPECIFIC PROJECT LISTED IN APPLICATION) <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Capacity Building <input type="checkbox"/> Self-sufficiency/Support Services
<input type="checkbox"/> Homeownership MAX \$30K per unit		
<input type="checkbox"/> Homeowner Occupied Rehab MAX \$30K per unit		
For rental or homeownership capital projects, grants awarded ≤\$15,000, loans for >\$15,000		

Brief description of the project and the gap that MAHT funds will be filling (limit 250 words)

3. Project Identification

Project name: _____

Address: _____ County: _____

City: _____ State: _____ Zip: _____

State Legislative District Number: _____

Congressional District Number: _____

If multiple sites, provide addresses and legislative districts for site.

- Please attach a location map and site description (ATTACH AS ATTACHMENT A).

4. Housing Units

The project consists of _____ total housing units*,
of which _____ will be funded through MAHT.

Of the MAHT funded units

_____ will be affordable to households with incomes at or
below 30% of the area median income (AMI), and
_____ will be affordable to households with incomes
between 31% and 50% of AMI

Population to be served:

_____ Families with minor children

_____ Single Adults

_____ Other (list) _____

Number of years MAHT units will be committed to serving population above _____
(minimum 15 years)

FOR RENTAL PROJECTS ONLY, List monthly rents per unit by bedroom size

	In the development	Funded by MAHT
0 BR units	_____	_____
1 BR units	_____	_____
2 BR units	_____	_____
3+ BR units	_____	_____
Single Room Occupancy units	_____	_____

FOR HOMEOWNERSHIP PROJECTS ONLY, List sales price of homes

* For SRO, Emergency Shelters, etc, UNITS will be the number of beds funded.

5. Maryland Affordable Housing Trust Budget (MAHT dollars only)**MAHT FUNDS REQUESTED (COMPLETE SECTION 7 ALSO)**

	<u>AMOUNT</u>
Operating Assistance	\$ _____
Capacity building	_____
Self-sufficiency / Support services	_____
Pre-Development	_____
Acquisition	_____
New Construction	_____
Rehabilitation	_____
Other (list): _____	_____
_____	_____

TOTAL MAHT FUNDS REQUESTED**(a) \$ _____**

(must match total MAHT amount requested in 2(a))

6. Total project development funding

<u>NON-MAHT FUNDS</u>	<u>SOURCE</u>	<u>*COMMITTED</u>	<u>*APPLIED FOR</u>
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Other Maryland DHCD funding

_____ Rental Housing	\$ _____	\$ _____
_____ LIHTC	_____	_____
_____ Transitional	_____	_____
_____ Group Home	_____	_____

(Specify agency
or program)

Other State govt. funds	_____	\$ _____	\$ _____
Federal govt. funds	_____	_____	_____
Local govt. funds and other subsidies	_____	_____	_____
Private grants	_____	_____	_____
Private loans	_____	_____	_____
Applicant's funds	_____	_____	_____
Other: _____	_____	_____	_____

TOTALS**(a) \$ _____ (b) \$ _____****TOTAL Non-MAHT COMMITTED AND APPLIED FOR (a) + (b) above** _____**TOTAL MAHT FUNDS REQUESTED from 5(a) or 2(a)** + _____**TOTAL PROJECT FUNDING FROM ALL SOURCES** \$ _____
(TOTAL PROJECT COST in 2(b) MUST MATCH TOTAL PROJECT FUNDING ABOVE)

- Please attach documentation verifying non-MAHT funds including the interest rate, repayment period and other terms governing these funds
(Attach as Attachment B)

7. USE OF FUNDS

FOR SECTION 7, APPLICANTS ONLY NEED TO COMPLETE THE SUB-SECTION or SECTIONS FOR WHICH FUNDING IS BEING REQUESTED

(i.e., Operating Assistance, Capacity Building, Self-Sufficiency/Support Services, Predevelopment, or Capital)

7A. Operating Assistance request for one (1) year

Operating Assistance for one (1) year	MAHT FUNDS	OTHER FUNDS	TOTAL COST
Advertising and Marketing	_____	_____	_____
Management Fee	_____	_____	_____
Office Supplies	_____	_____	_____
Office Salaries	_____	_____	_____
Legal Expenses (project only)	_____	_____	_____
Auditing Expenses (project only)	_____	_____	_____
Permits, Licenses and Misc. Taxes	_____	_____	_____
Telephone and Answering Services	_____	_____	_____
Accounting Services and Fees	_____	_____	_____
Other _____	_____	_____	_____
ADMINISTRATIVE TOTAL (from categories above)	\$ _____	\$ _____	\$ _____
Exterminating	_____	_____	_____
Heating & Air Conditioning Maintenance	_____	_____	_____
Garbage and Trash Removal	_____	_____	_____
Painting	_____	_____	_____
Electrical Repairs & Supplies	_____	_____	_____
Plumbing Repairs & Supplies	_____	_____	_____
Roof Repairs	_____	_____	_____
Grounds Maintenance	_____	_____	_____
Contract and Supplies	_____	_____	_____
Janitorial Supplies	_____	_____	_____
Costs associated with lead-paint reduction or maintenance	_____	_____	_____
Misc. Operating and Maintenance Expenses (please specify)	_____	_____	_____
Other _____	_____	_____	_____
MAINTENANCE TOTALS (from categories above)	\$ _____	\$ _____	\$ _____
UTILITIES PAID BY OWNER	_____	_____	_____
REAL ESTATE TAXES	_____	_____	_____
GROUND RENT	_____	_____	_____
RESERVE FOR REPLACEMENT	_____	_____	_____
OTHER (list) _____	_____	_____	_____
TOTAL	\$ _____	\$ _____	\$ _____

7B. Capacity Building Request

Capacity Building (MAHT funding must be related to the specific housing project named in this application)

Purpose/use of funds:	MAHT FUNDS	OTHER FUNDS	TOTAL COST
_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____
TOTALS	\$ _____	\$ _____	\$ _____

7C. Self-sufficiency / Support services request for one (1) year

Check all that apply and enter funding amounts anticipated for salaries and other fees related to providing the services to residents in the specific housing project named in this application:

	MAHT FUNDS	OTHER FUNDS	TOTAL COST
_____ Job skills training	\$ _____	\$ _____	\$ _____
_____ Job search assistance	_____	_____	_____
_____ Educational courses	_____	_____	_____
_____ Budget counseling	_____	_____	_____
_____ Substance abuse aid	_____	_____	_____
_____ Mental health care	_____	_____	_____
_____ Other health care	_____	_____	_____
_____ Child care	_____	_____	_____
_____ Other project-specific costs:	_____	_____	_____
TOTAL _____	\$ _____	\$ _____	\$ _____

The funding requested is for a
new position current position

For services not to be provided by applicant, please list service and service provider:

7D. Predevelopment request (list \$ amount requested for each category below)

Predevelopment awards are usually made as zero interest, deferred loans which are expected to be repaid when permanent financing is acquired for the project.

Architect Fee	\$ _____
Design	_____
Supervision	_____
Legal Fees	_____
Packaging/Processing	_____
Marketing	_____
Surveys and Soil Borings	_____
Appraisal	_____
Environmental Study	_____
Market Study	_____
Other (list) _____	_____
Total for this section	\$ _____

7E. Capital requests (Acquisition, New Construction or Rehabilitation)

Capital requests complete Sections 8 and 9 also.

Residential structures	\$ _____
Nonresidential structures	_____
On Site improvements	_____
Off Site improvements	_____
General requirements	_____
Contractor Fees	_____
*Developer's Fee	_____
 Architect Fee	 \$ _____
Design	_____
Supervision	_____
Legal Fees	_____
Packaging/Processing	_____
Marketing	_____
Surveys and Soil Borings	_____
Appraisal	_____
Environmental Study	_____
Market Study	_____
Total for this section	\$ _____

General requirements:	\$ _____	_____ % of Subtotal
Builder's General Overhead:	_____	_____ % of Subtotal
Builder's Profit:	_____	_____ % of Subtotal

PROJECT COST PER UNIT \$ _____

*The amount and use of developer's fee will be relevant to the evaluation of the application

8. Project Readiness and Site Information

Identify form of site control: ☐ ownership ☐ purchase agreement ☐ other
☐ lease ☐ option

If no site control, please explain: _____

Is site properly zoned for your development? ☐ yes ☐ no

Attach evidence that the site is properly zoned for the proposed use or if a variance or exception is required, evidence that a request has been filed and a hearing date has been scheduled.

Will you own the property directly ☐ yes ☐ no

If property is to be owned by related entity, please provide name of entity and specify relationship (e.g., subsidiary corporation or partnership of which applicant is general partner) (name of entity and relationship) _____

PLEASE NOTE: ENTITY OWNING PROPERTY MUST ALSO BE AN APPLICANT

Are there liens or other encumbrances on the property that must be cleared by allocating funds to them? ☐ yes ☐ no If YES, what are they? _____

	YES	NO	IF NO, WHEN?
<u>Have you obtained:</u>			
Blueprints ¹	_____	_____	_____
Zoning changes	_____	_____	_____
Building permits	_____	_____	_____
Utility hookups	_____	_____	_____
Environmental report	_____	_____	_____
Commitments from service providers	_____	_____	_____

¹ Also attach copies of unit floor plans

Is the construction company bonded? ☐ yes ☐ no

Will the project require any displacement of current occupants? ☐ yes ☐ no

If yes, will you compensate or relocate those who are displaced? ☐ yes ☐ no

Describe your proposed plan for relocation assistance:

Please attach copies of supporting documents – evidence of zoning, deeds, permits, leases, options, sales agreements, etc. Projects requesting assistance for homeownership (rehab or acquisition) must include a current Home Inspection Report (Attach as Attachment C)

9. Work schedule: Use anticipated or actual calendar dates. Be sure to include dates of initial closing, construction start and substantial completion.

<u>Activity</u>	<u>Anticipated completion date</u>
Financial Commitment for funding sources	_____
Initial closing date	_____
Location survey complete	_____
Preliminary site plan complete	_____
Design, development and pricing	_____
Site plan approval	_____
Construction and bid documents	_____
Engineering plan approval	_____
Final pricing	_____
Building permit	_____
Construction contract	_____
Start construction	_____
Substantial completion	_____
Final completion	_____

ALL APPLICANTS MUST COMPLETE SECTIONS 8 through 13

10. Need for MAHT funding (limit of 250 words): Describe the specific need for MAHT funds for the proposed housing project, e.g. why is there a funding gap? Please describe the need for the total project and the existing housing and economic conditions for the project. Explain how the number and type of units to be provided will address the need.

ATTACH: corroborating information, such as: budget and financing information indicating gap in funding, appraisal, market study, waiting list, etc. (ATTACH AS ATTACHMENT D).

11. Site (limit of 250 words): Describe area in which the site is located, including types and condition of housing in the area; availability of public transportation; location of schools, shopping and employment centers, information on crime and other information relevant to the site.

12. Community involvement (limit of 250 words): Explain how long and in what manner the applicant has served the community in which the project will be located. Also describe any support the proposed project has received from local political officials, community groups, potential project residents and residents who live near project site.

ATTACH: - copies of any evidence of local support for the project (ATTACH AS ATTACHMENT E).

13. Applicant ability: 1.) Describe the objective, management structure and staffing of your organization, 2.) Explain your organization's experience and ability to implement and manage low-income housing, 3.) Summarize your prior experience in providing self-sufficiency services for the target population. If a third party will be involved in management or service provision, describe its role.

ATTACH:

- financial statements (ATTACH AS ATTACHMENT F)

- organizational documents or partnership agreement (ATTACH AS ATTACHMENT G)

14. Green Building and Sustainable Housing (limit of 250 words)

Describe how this project addresses green building technologies and how your organization encourages sustainable development. Use criteria from Earthcraft, the National Association of Homebuilders Model Green Home Building Guidelines, U.S. Green Building Council (LEED) criteria or criteria from Green Communities Initiative of Enterprise Community Partners when submitting a response to this section.

ATTACH: Documentation will include checklists using criteria from any of the entities above (Attach as Attachment H)

15. Legal Documents

The following forms must be completed and attached to all applications:

- Incumbency Certificate *
- Corporate Resolution *
- MAHT Assurance of Compliance*
- Contract Affidavit*
- Access To Public Records Act Notice And Waiver*

* Instructions and documents are located in file labeled "Round 40 Legal Documents and Instructions" on MAHT's web site.

NOTE: A Certificate of Good Standing will only be required if this application receives funding (see Program Guidelines on web site)

(ATTACH LEGAL DOCUMENTS AS ATTACHMENT I)

Checklist

Check all items that you have included with this application:

Note: If a subsidiary is an applicant include a second checklist and all applicable attachments relating to the subsidiary. If a subsidiary will own the property, they must be included as an applicant.

- _____ Attachment A: location map/site description
- _____ Attachment B: documentation of loan terms
- _____ Attachment C: deeds, permits, sales agreement, etc., Home Inspection Reports (now required for homeownership rehab or acquisition)
- _____ Attachment D: appraisal, market study, housing waiting list, etc.
- _____ Attachment E: evidence of local support for the project
- _____ Attachment F: financial statements
- _____ Attachment G: organizational documents (**must** be submitted) **
 - _____ Bylaws
 - _____ Articles of Incorporation
- _____ Attachment H: Green Building and Sustainable Housing Communities Criteria
 - _____ First optional checklist selected by applicant
 - _____ Second optional checklist selected by applicant (if necessary)
- _____ Attachment I: legal documents
 - _____ Board resolution authorizing the application*
 - _____ Contract Affidavit*
 - _____ Incumbency Certificate*
 - _____ MAHT Assurance of Compliance*
 - _____ Access To Public Records Act Notice and Waiver*

* These forms are in a file labeled "Round 40 Legal Documents and Instructions" and can be downloaded from MAHT's web site

** A copy of the organization's By-laws and Articles of Incorporation are required to be submitted with each application.